

BEST AVAILABLE COPY
 (ISSUED ON STAPLED PAPER & READING IN REVERSE, USE CROSS REFERENCES)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	OK	7091	12/3
O.I.P.E. CLASSIFIER			2/2/99
FORMALITY REVIEW	OK	6891	12/16/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Final	Original	Date
1	✓	✓	1/15/99
2	✓	✓	1/15/99
3	✓	✓	1/15/99
4	✓	✓	1/15/99
5	✓	✓	1/15/99
6	✓	✓	1/15/99
7	✓	✓	1/15/99
8	✓	✓	1/15/99
9	✓	✓	1/15/99
10	✓	✓	1/15/99
11	✓	✓	1/15/99
12	✓	✓	1/15/99
13	✓	✓	1/15/99
14	✓	✓	1/15/99
15	✓	✓	1/15/99
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18	✓	✓	1/15/99
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20	✓	✓	1/15/99
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here